Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number 19/2041 - 64

	••	CLAIMS A		[SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			(Column 1)		(Coldinii 2)		Ė	RATE		OR 1 1		
FOR			NUMBER EUER		NUMBER EXTRA		F	BASIC FEE	FEE	1	RATE	FEE
			NUMBER FILED		NUMBER EXTRA		₽	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ (minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		0			X42=		OR	X84=	(
		IDENT CLAIM P						+140=		OR	+280=	-
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	"0" in column 2		TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II								l			OTHER	THAN
_		(Column 1) CLAIMS		(Colu		(Column 3) SMALI			ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus				Г	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	,
								TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								DIT. FEE		OR,	ADDIT. FEE	
В		CLAIMS		HIGH	EST		Г	·	ADDI-	•		ADDI-
AMENDMENT I		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42≃		OR	X84=	
L	FIRST PRESE	PENDENT	CLAIM			+140=			.000			
:										OR	+280= TOTAL	
										OR ,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	\vdash	X42=			X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEPENDENT		CLAIM	CLAIM		A42=		OR		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	_
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
	The "Highest Nun	nber Previously Pa	id For" (Total o	Independ	ent) is the	highest number	found	in the app	ropriate box	in col	umn 1.	